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CONFIRMATION NO. 5748

|  |   |                                  |   |                                      |                                |
|--|---|----------------------------------|---|--------------------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/694,750   | <b>FILING OR 371(c) DATE</b><br>10/29/2003<br><b>RULE</b>   | <b>CLASS</b><br>347              | <b>GROUP ART UNIT</b><br>2853   | <b>ATTORNEY DOCKET NO.</b><br>117633 |                                |
| <b>APPLICANTS</b><br>Yoshinori Endo, Toyota-shi, JAPAN;<br><b>** CONTINUING DATA *****</b> <i>NONE</i><br><b>** FOREIGN APPLICATIONS *****</b> <i>3 on</i><br>JAPAN 2002-316953 10/31/2002<br><b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>01/28/2004  |   |                                  |   |                                      |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged <i>[Signature]</i> Examiner's Signature <i>[Initials]</i> Initials |   | <b>STATE OR COUNTRY</b><br>JAPAN | <b>SHEETS DRAWING</b><br>5  | <b>TOTAL CLAIMS</b><br>35            | <b>INDEPENDENT CLAIMS</b><br>3 |
| <b>ADDRESS</b><br>25944  |   |                                  |   |                                      |                                |
| <b>TITLE</b><br>Image-forming device   |   |                                  |   |                                      |                                |
| <b>FILING FEE RECEIVED</b><br>1040   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                      |                                |